# Joint debtors may complete one statement only.

**B22C** (Official Form 22C) (Chapter 13) (01/08)

(If known)

In re: OTERO CASTRO, JOSE L

Case Number: \_

### According to the calculations required by this statement: ☐ The applicable commitment period is 3 years. The applicable commitment period is 5 years. **☑** Disposable income is determined under § 1325(b)(3). ☐ Disposable income is not determined under § 1325(b)(3). (Check the boxes as directed in Lines 17 and 23 of this statement.)

### **CHAPTER 13 STATEMENT OF CURRENT MONTHLY INCOME** AND CALCULATION OF COMMITMENT PERIOD AND DISPOSABLE INCOME

In addition to Schedules I and J, this statement must be completed by every individual Chapter 13 debtor, whether or not filing jointly.

		Part I. REPO	ORT OF INCOME					
	Mar a.	Marital/filing status. Check the box that applies and complete the balance of this part of this statement as directed.  a.   Unmarried. Complete only Column A ("Debtor's Income") for Lines 2-10.						
		Married. Complete both Column A ("Debtor"			's Income") for	Lines 2-10.		
1	All figures must reflect average monthly income received from all sources, derived during the six calendar months prior to filing the bankruptcy case, ending on the last day of the month before the filing. If the amount of monthly income varied during the six months, you must divide the six-month total by six, and enter the result on the appropriate line.					Column B Spouse's Income		
2	Gro	ss wages, salary, tips, bonuses, overtime, commi	ssions.		\$	\$		
3	a and one attac	me from the operation of a business, profession denter the difference in the appropriate column(s) business, profession or farm, enter aggregate number them. Do not enter a number less than zero. Do not enter a deduction in Part IV						
	a.	Gross receipts	\$	6,968.15				
	b.	Ordinary and necessary operating expenses	\$	2,095.99				
	c.	Business income	Subtract Line b from Line	a	\$ 4,872.16	\$		
4	diffe	t and other real property income. Subtract Line I rence in the appropriate column(s) of Line 4. Do n include any part of the operating expenses enter IV.						
·	a.	Gross receipts	\$					
	b.	Ordinary and necessary operating expenses	\$					
	c.	Rent and other real property income	Subtract Line b from Line	a	\$	\$		
5	Inte	rest, dividends, and royalties.			\$	\$		
6	Pension and retirement income.				\$	\$		
7	Any amounts paid by another person or entity, on a regular basis, for the household expenses of the debtor or the debtor's dependents, including child support paid for that purpose. Do not include alimony or separate maintenance payments or amounts paid by the debtor's spouse.			\$	\$			

B22C (Offic	cial Form	22C)	(Chapter	13)	(01/08)
-------------	-----------	------	----------	-----	---------

8	Unemployment compensation. Enter the amount in the appropriate column(s) of Line 8. However, if you contend that unemployment compensation received by you or your spouse was a benefit under the Social Security Act, do not list the amount of such compensation in Column A or B, but instead state the amount in the space below:							
	Unemployment compensation claimed to be a benefit under the Social Security Act	Debtor \$	Spouse \$	\$			\$	
9	Income from all other sources. Spect sources on a separate page. Total and maintenance payments paid by your or separate maintenance. Do not inct Act or payments received as a victim of international or domestic terrorism.  a.  b.	enter on Line 9. <b>Do not inc</b> spouse, but include all ot lude any benefits received to a war crime, crime agains	lude alime her paym ander the S	ony or separa ents of alimo Social Security	ny '		\$	
10	<b>Subtotal.</b> Add Lines 2 thru 9 in Colum through 9 in Column B. Enter the total		ompleted,	add Lines 2	\$	4,872.	16 \$	
11	Total. If Column B has been completed, add Line 10, Column A to Line 10, Column B, and enter the total. If Column B has not been completed, enter the amount from Line 10, Column A.						4,872.16	
	Part II. CALCUL	ATION OF § 1325(b)(4	) COMN	MITMENT 1	PERI	OD		
12	Enter the amount from Line 11.						\$	4,872.16
13	Marital Adjustment. If you are marrithat calculation of the commitment per your spouse, enter the amount of the in basis for the household expenses of your a.  b. c.	riod under § 1325(b)(4) doe acome listed in Line 10, Co	es not requ lumn B tha	at was NOT pa	of the i	ncome of		
	Total and enter on Line 13.			<u>"</u>			\$	0.00
14	Subtract Line 13 from Line 12 and o	enter the result.					\$	4,872.16
15	<b>Annualized current monthly income for § 1325(b)(4).</b> Multiply the amount from Line 14 by the number 12 and enter the result.					\$	58,465.92	
16	Applicable median family income. E household size. (This information is at the bankruptcy court.)	vailable by family size at w	ww.usdoj.;	gov/ust/ or fro	m the	clerk of	6	22 222 22
	a. Enter debtor's state of residence: Pu			er debtor's hou	senoi	1 size: _ <b>6</b> _	\$	39,630.00
17	Application of § 1325(b)(4). Check the applicable box and proceed as directed.  ☐ The amount on Line 15 is less than the amount on Line 16. Check the box for "The applicable commitment period is 3 years" at the top of page 1 of this statement and continue with this statement.  ☑ The amount on Line 15 is not less than the amount on Line 16. Check the box for "The applicable commitment period is 5 years" at the top of page 1 of this statement and continue with this statement.							
	Part III. APPLICATION O					LE INCO	ME	
10		. , , ,						4.070.40
18	Enter the amount from Line 11.						\$	4.872.16

19	Marital adjustment. If you are married, but are not filing jointly with your spouse, enter on Line 19 the total of any income listed in Line 10, Column B that was NOT paid on a regular basis for the household expenses of the debtor or the debtor's dependents. Specify in the lines below the basis for excluding the Column B income (such as payment of the spouse's tax liability or the spouse's support of persons other than the debtor or the debtor's dependents) and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If the conditions for entering this adjustment do not apply, enter zero.						
	a.				\$		
	b.				\$		
	c.				\$		
	Total and enter on Line 19.					\$	0.00
20	Current monthly income for § 1	1325(b)(3). Subtract	Line 1	9 from Line 18 and enter the	result.	\$	4,872.16
21	Annualized current monthly included and enter the result.	come for § 1325(b)(	( <b>3).</b> Mu	ltiply the amount from Line 2	20 by the number	\$	58,465.92
22	Applicable median family incor	ne. Enter the amoun	t from l	Line 16.		\$	39,630.00
23	Application of § 1325(b)(3). Che  The amount on Line 21 is m under § 1325(b)(3)" at the top	nore than the amount of page 1 of this st	nt on L atemen	Line 22. Check the box for "It and complete the remaining	parts of this staten	nent.	
	The amount on Line 21 is not determined under § 1325(b)(3 complete Parts IV, V, or VI	3)" at the top of page					
	Part IV. CALCUL	ATION OF DED	UCTI	ONS ALLOWED UNDE	R § 707(b)(2)		
	Subpart A: Ded	uctions under Stan	dards	of the Internal Revenue Sei	vice (IRS)		
24A	National Standards: food, apparel and services, housekeeping supplies, personal care, and miscellaneous. Enter in Line 24A the "Total" amount from IRS National Standards for Allowable Living Expenses for the applicable household size. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.)					\$	1,894.00
24B	National Standards: health care. Enter in Line a1 below the amount from IRS National Standards for Out-of-Pocket Health Care for persons under 65 years of age, and in Line a2 the IRS National Standards for Out-of-Pocket Health Care for persons 65 years of age or older. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) Enter in Line b1 the number of members of your household who are under 65 years of age, and enter in Line b2 the number of members of your household who are 65 years of age or older. (The total number of household members must be the same as the number stated in Line 16b.) Multiply Line a1 by Line b1 to obtain a total amount for household members under 65, and enter the result in Line c1. Multiply Line a2 by Line b2 to obtain a total amount for						
	Household members under 65	years of age	Hou	sehold members 65 years of	age or older		
	a1. Allowance per member	57.00	a2.	Allowance per member	144.00		
	b1. Number of members	6	b2.	Number of members	0		
	c1. Subtotal	342.00	c2.	Subtotal	0.00	\$	342.00
25A	Local Standards: housing and utilities; non-mortgage expenses. Enter the amount of the IRS Housing and Utilities Standards; non-mortgage expenses for the applicable county and household size. (This					\$	573.00

25B	Local Standards: housing and utilities; mortgage/rent expense. Enter, the IRS Housing and Utilities Standards; mortgage/rent expense for your conformation is available at www.usdoj.gov/ust/ or from the clerk of the band the total of the Average Monthly Payments for any debts secured by your house the total of the Average Monthly Payments for any debts secured by your house and utilities Standards; mortgage/rental expense  a. IRS Housing and Utilities Standards; mortgage/rental expense  b. Average Monthly Payment for any debts secured by your home, if any, as stated in Line 47  c. Net mortgage/rental expense  Local Standards: housing and utilities; adjustment. If you contend that and 25B does not accurately compute the allowance to which you are entit Utilities Standards, enter any additional amount to which you contend you for your contention in the space below:	sounty and household size (this alkruptcy court); enter on Line become, as stated in Line 47; an amount less than zero.  \$ 1,442.00  \$ Subtract Line b from Line a  the process set out in Lines 25A led under the IRS Housing and	\$ 1,442.00 \$		
27A	Local Standards: transportation; vehicle operation/public transportation and expense allowance in this category regardless of whether you pay the expense and regardless of whether you use public transportation.  Check the number of vehicles for which you pay the operating expenses or expenses are included as a contribution to your household expenses in Line 10 10 10 2 or more.  If you checked 0, enter on Line 27A the "Public Transportation" amount for Transportation. If you checked 1 or 2 or more, enter on Line 27A the "Operation of the applicable number of vehicles in the Statistical Area or Census Region. (These amounts are available at www.us of the bankruptcy court.)	r for which the operating a vehicle of the forwhich the operating e 7.  rom IRS Local Standards: erating Costs" amount from IRS he applicable Metropolitan	\$ 235.00		
27B	Local Standards: transportation; additional public transportation expense. If you pay the operating expenses for a vehicle and also use public transportation, and you contend that you are entitled to an additional deduction for your public transportation expenses, enter on Line 27B the "Public Transportation" amount from IRS Local Standards: Transportation. (This amount is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.)				
28	Local Standards: transportation ownership/lease expense; Vehicle 1. Combined which you claim an ownership/lease expense. (You may not claim an owner than two vehicles.)  ✓ 1 □ 2 or more.  Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Transportation (available at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bathe total of the Average Monthly Payments for any debts secured by Vehic subtract Line b from Line a and enter the result in Line 28. Do not enter a a. IRS Transportation Standards, Ownership Costs  Average Monthly Payment for any debts secured by Vehicle 1, as b. stated in Line 47  c. Net ownership/lease expense for Vehicle 1	S Local Standards: ankruptcy court); enter in Line b	\$ 489.00		

B22C (	(Official Form 22C) (Chapter 13) (01/08)				
	Local Standards: transportation ownership/lease checked the "2 or more" Box in Line 28.	<b>expense; Vehicle 2.</b> Complete this Line only if you			
29	Transportation (available at www.usdoj.gov/ust/ or fr the total of the Average Monthly Payments for any de	Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards:  Transportation (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 2, as stated in Line 47; subtract Line b from Line a and enter the result in Line 29. <b>Do not enter an amount less than zero.</b>			
	a. IRS Transportation Standards, Ownership Cost	ts \$			
	b. Average Monthly Payment for any debts secure stated in Line 47	ed by Vehicle 2, as \$			
	c. Net ownership/lease expense for Vehicle 2	Subtract Line b from Line a	\$		
30	Other Necessary Expenses: taxes. Enter the total average monthly expense that you actually incur for all federal, state, and local taxes, other than real estate and sales taxes, such as income taxes, self-employment taxes, social-security taxes, and Medicare taxes. Do not include real estate or sales taxes.				
31	Other Necessary Expenses: involuntary deductions for employment. Enter the total average monthly deductions that are required for your employment, such as mandatory retirement contributions, union dues, and uniform costs. Do not include discretionary amounts, such as voluntary 401(k) contributions.				
32	Other Necessary Expenses: life insurance. Enter total average monthly premiums that you actually pay for term life insurance for yourself. Do not include premiums for insurance on your dependents, for whole life or for any other form of insurance.				
33	Other Necessary Expenses: court-ordered payments. Enter the total monthly amount that you are required to pay pursuant to the order of a court or administrative agency, such as spousal or child support payments. Do not include payments on past due obligations included in Line 49.				
34	Other Necessary Expenses: education for employment or for a physically or mentally challenged child. Enter the total average monthly amount that you actually expend for education that is a condition of employment and for education that is required for a physically or mentally challenged dependent child for whom no public education providing similar services is available.				
35	Other Necessary Expenses: childcare. Enter the total average monthly amount that you actually expend on childcare—such as baby-sitting, day care, nursery and preschool. Do not include other educational payments.				
36	Other Necessary Expenses: health care. Enter the total average monthly amount that you actually expend on health care that is required for the health and welfare of yourself or your dependents, that is not reimbursed by insurance or paid by a health savings account, and that is in excess of the amount entered in Line 24B. Do not include payments for health insurance or health savings accounts listed in Line 39.				
37	Other Necessary Expenses: telecommunication services. Enter the total average monthly amount that you actually pay for telecommunication services other than your basic home telephone and cell phone service—such as pagers, call waiting, caller id, special long distance, or internet service—to the extent necessary for your health and welfare or that of your dependents. Do not include any amount previously deducted.				
38	Total Expenses Allowed under IRS Standards. En	ter the total of Lines 24 through 37.	\$	6,809.57	

		al Form 22C) (Chapter 13) (01/08)  Subpart B: Additional I  Note: Do not include any exp				
	expe	Ith Insurance, Disability Insurance, and Healt nses in the categories set out in lines a-c below t se, or your dependents.	th Savings Account	Expenses. List the		
	a.	Health Insurance	\$	533.55		
	b.	Disability Insurance	\$			
39	c.	Health Savings Account	\$			
	Total	l and enter on Line 39	1		!	\$ 533.55
		u do not actually expend this total amount, st pace below:	ate your actual total	average monthly ex	penditures in	
	\$					
40	mont elder	tinued contributions to the care of household thly expenses that you will continue to pay for the rly, chronically ill, or disabled member of your hall to pay for such expenses. Do not include pay	e reasonable and ne ousehold or membe	cessary care and sup r of your immediate	port of an	\$
41	you a Servi	ection against family violence. Enter the total a actually incur to maintain the safety of your familices Act or other applicable federal law. The nat idential by the court.	ly under the Family	Violence Prevention	n and	\$
42	Loca prov	ne energy costs. Enter the total average monthly all Standards for Housing and Utilities, that you a ride your case trustee with documentation of your did amount claimed is reasonable.	ctually expend for h y <b>our actual expens</b> e	ome energy costs. Y	ou must	\$
43	actua secon trust	cation expenses for dependent children under ally incur, not to exceed \$137.50 per child, for an indary school by your dependent children less that the with documentation of your actual expenses asonable and necessary and not already accounts.	ttendance at a privat an 18 years of age. <b>Y</b> es, and you must ex	e or public elementa You must provide y xplain why the amo	ry or <b>our case</b>	\$ 550.00
44	cloth Natio	itional food and clothing expense. Enter the totaling expenses exceed the combined allowances from al Standards, not to exceed 5% of those combined in the clerk of the bankrupt tional amount claimed is reasonable and necessity.	or food and clothing ined allowances. (The tcy court.) <b>You mus</b>	(apparel and servic his information is av	es) in the IRS ailable at	\$
45	chari	ritable contributions. Enter the amount reasonal table contributions in the form of cash or finance of U.S.C. § 170(c)(1)-(2). Do not include any anome.	ial instruments to a	charitable organizati	on as defined	\$
46	Tota	l Additional Expense Deductions under § 707	(b). Enter the total of	of Lines 39 through	45.	\$ 1,083.55

52

### **Subpart C: Deductions for Debt Payment** Future payments on secured claims. For each of your debts that is secured by an interest in property that you own, list the name of the creditor, identify the property securing the debt, state the Average Monthly Payment, and check whether the payment includes taxes or insurance. The Average Monthly Payment is the total of all amounts scheduled as contractually due to each Secured Creditor in the 60 months following the filing of the bankruptcy case, divided by 60. If necessary, list additional entries on a separate page. Enter the total of the Average Monthly Payments on Line 47. Average Does payment 47 Monthly include taxes or Name of Creditor Property Securing the Debt **Payment** insurance? \$ yes no \$ b. yes no yes no Total: Add lines a, b and c. \$ Other payments on secured claims. If any of debts listed in Line 47 are secured by your primary residence, a motor vehicle, or other property necessary for your support or the support of your dependents. you may include in your deduction 1/60th of any amount (the "cure amount") that you must pay the creditor in addition to the payments listed in Line 47, in order to maintain possession of the property. The cure amount would include any sums in default that must be paid in order to avoid repossession or foreclosure. List and total any such amounts in the following chart. If necessary, list additional entries on a separate page. 48 1/60th of the Name of Creditor Property Securing the Debt Cure Amount \$ b. \$ Total: Add lines a, b and c. \$ Payments on prepetition priority claims. Enter the total amount, divided by 60, of all priority claims, 49 such as priority tax, child support and alimony claims, for which you were liable at the time of your bankruptcy filing. Do not include current obligations, such as those set out in Line 33. \$ 215.82 Chapter 13 administrative expenses. Multiply the amount in Line a by the amount in Line b, and enter the resulting administrative expense. Projected average monthly Chapter 13 plan payment. \$ Current multiplier for your district as determined under schedules issued by the Executive Office for United States 50 Trustees. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) X Total: Multiply Lines a Average monthly administrative expense of Chapter 13 and b \$ 51 Total Deductions for Debt Payment. Enter the total of Lines 47 through 50. 215.82 **Subpart D: Total Deductions from Income** 8,108.94 **Total of all deductions from income.** Enter the total of Lines 38, 46, and 51.

≥
ŏ
are
ž
Sof
us
.5
۴
24]
24
98
66-0
-800
Ξ
nc.
Ď,
Ē
Ż
œ
200
3-,
1993-200
о О

	Part V. DETERMINATION OF DISPOSABLE INCOME UNDER	§ 1325(b)(2)				
53	<b>Total current monthly income.</b> Enter the amount from Line 20.		\$	4,872.16		
54	<b>Support income.</b> Enter the monthly average of any child support payments, foster care payments, or disability payments for a dependent child, reported in Part I, that you received in accordance with applicable nonbankruptcy law, to the extent reasonably necessary to be expended for such child.					
55	Qualified retirement deductions. Enter the monthly total of (a) all amounts withheld by your employer from wages as contributions for qualified retirement plans, as specified in § 541(b)(7) and (b) all required repayments of loans from retirement plans, as specified in § 362(b)(19).					
56	<b>Total of all deductions allowed under § 707(b)(2).</b> Enter the amount from Line 52.		\$	8,108.94		
	<b>Deduction for special circumstances.</b> If there are special circumstances that justify addition there is no reasonable alternative, describe the special circumstances and the resin lines a-c below. If necessary, list additional entries on a separate page. Total the expense total in Line 57. You must provide your case trustee with documentation of these expenses provide a detailed explanation of the special circumstances that make such expenses neces reasonable.	ulting expenses es and enter the and you must				
57	Nature of special circumstances	Amount of expense				
	a.	\$				
	b.	\$				
	c.	\$				
	Total: Add I	Lines a, b, and c	\$			
58	<b>Total adjustments to determine disposable income.</b> Add the amounts on Lines 54, 55, 5 enter the result.	6, and 57 and	\$	8,108.94		
59	Monthly Disposable Income Under § 1325(b)(2). Subtract Line 58 from Line 53 and enter the result.					
	Other Expenses. List and describe any monthly expenses, not otherwise stated in this form and welfare of you and your family and that you contend should be an additional deduction income under § 707(b)(2)(A)(ii)(I). If necessary, list additional sources on a separate page average monthly expense for each item. Total the expenses.	from your curren	t mont	hly		
	Expense Description	Monthly A	mount			
60	a.	\$				
	b.	\$				
	c.	\$				
	Total: Add Lines a, b and	c \$				
	Part VII. VERIFICATION					
	I declare under penalty of perjury that the information provided in this statement is true and both debtors must sign.)	l correct. (If this a	joint	case,		
61	Date: August 18, 2011 Signature: /s/ JOSE L OTERO CASTRO					
61	Date: August 18, 2011 Signature: /s/ JOSE L OTERO CASTRO (Debtor)					
61						

B1 (Official Form 1) (1/08)

United St. Distr		Volu	intary Petition		
Name of Debtor (if individual, enter Last, First, Mid OTERO CASTRO, JOSE L	dle):	Name of Joint Debtor (Spouse) (Last, First, Middle):			
All Other Names used by the Debtor in the last 8 year (include married, maiden, and trade names):	ars		used by the Joint Debtor i maiden, and trade names)		years
Last four digits of Soc. Sec. or Individual-Taxpayer EIN (if more than one, state all): <b>8517</b>	I.D. (ITIN) No./Complete	Last four digits o EIN (if more than	f Soc. Sec. or Individual-T n one, state all):	axpayer I.D	. (ITIN) No./Complete
Street Address of Debtor (No. & Street, City, State & EL MIRADOR CALLE 7, I-6	& Zip Code):	Street Address of	Joint Debtor (No. & Stree	et, City, Stat	e & Zip Code):
SAN JUAN, PR	ZIPCODE 00926			Z	IPCODE
County of Residence or of the Principal Place of Bus San Juan	siness:	County of Reside	ence or of the Principal Pla	ce of Busine	ess:
Mailing Address of Debtor (if different from street a	ddress)	Mailing Address	of Joint Debtor (if differer	nt from stree	et address):
	ZIPCODE			Z	IPCODE
Location of Principal Assets of Business Debtor (if o	different from street address a	bove):			
				Z	ZIPCODE
Type of Debtor (Form of Organization) (Check one box.)  ✓ Individual (includes Joint Debtors) See Exhibit D on page 2 of this form.  ☐ Corporation (includes LLC and LLP) ☐ Partnership ☐ Other (If debtor is not one of the above entities, check this box and state type of entity below.)  ✓ Full Filing Fee attached ☐ Filing Fee to be paid in installments (Applicable to attach signed application for the court's considera is unable to pay fee except in installments. Rule 1 3A. ☐ Filing Fee waiver requested (Applicable to chapte attach signed application for the court's considera	Chapter of Bankruptcy Code Under Which the Petition is Filed (Check one box.)  Chapter 7				
Statistical/Administrative Information  Debtor estimates that funds will be available for	distribution to unsecured cre-	creditors, in ac	f the plan were solicited procordance with 11 U.S.C. §		THIS SPACE IS FOR COURT USE ONLY
Debtor estimates that, after any exempt property distribution to unsecured creditors.	is excluded and administrative	ve expenses paid, the	re will be no funds availab	le for	
Estimated Number of Creditors				П	
1-49 50-99 100-199 200-999 1,00 5,00	00- 5,001- 1	0,001- 25,00 5,000 50,00	01- 50,001-	Over 100,000	
Estimated Assets	П	]		П	
\$0 to \$50,001 to \$100,001 to \$500,001 to \$1,000 \$100,000 \$500,000 \$1 million \$100,000 \$100,00		50,000,001  to  \$100	,000,001 \$500,000,001 00 million to \$1 billion		
Estimated Liabilities	000,001 to \$10,000,001 \$0 million to \$50 million \$	50,000,001 to \$100	,000,001 \$500,000,001 00 million to \$1 billion	More than \$1 billion	

© 1993-2008 EZ-Filing, Inc. [1-800-998-2424] - Forms Software Only

B1 (Officia	al Form 1) (1/08)
Volunta	ry Petition
	e must be complet
	Prior 1
Location Where File	ed: <b>None</b>
Location Where File	ed:

Page 2

Voluntary Petition (This page must be completed and filed in every case)					
Prior Bankruptcy Case Filed Within Last 8	<b>Years</b> (If more than two, attach a	additional sheet)			
Location Where Filed: None	Case Number:	Date Filed:			
Location Where Filed:	Case Number:	Date Filed:			
Pending Bankruptcy Case Filed by any Spouse, Partner or	Affiliate of this Debtor (If mor	re than one, attach addition	al sheet)		
Name of Debtor: None	Case Number:	Date Filed:			
District:	Relationship:	Judge:			
Exhibit A  (To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11.)  Exhibit A is attached and made a part of this petition.	whose debts are primarily consumer debts.)  I, the attorney for the petitioner named in the foregoing petition, de that I have informed the petitioner that [he or she] may proceed to chapter 7, 11, 12, or 13 of title 11, United States Code, and explained the relief available under each such chapter. I further of that I delivered to the debtor the notice required by § 342(b) of Bankruptcy Code.				
	X /s/RAFAEL MALDONAD Signature of Attorney for Debtor(s)	U-PEREZ	8/18/11 Date		
Does the debtor own or have possession of any property that poses or is a or safety?  Yes, and Exhibit C is attached and made a part of this petition.  No  Exhi  (To be completed by every individual debtor. If a joint petition is filed, ea  Exhibit D completed and signed by the debtor is attached and ma	bit D  ach spouse must complete and attac				
If this is a joint petition:  Exhibit D also completed and signed by the joint debtor is attached.	ed a made a part of this petition.				
Information Regardin					
(Check any approximately Check and a residence, principal place of preceding the date of this petition or for a longer part of such 180 (Check any approximately approxim		is District for 180 days imm	ediately		
☐ There is a bankruptcy case concerning debtor's affiliate, general p	partner, or partnership pending in t	his District.			
☐ Debtor is a debtor in a foreign proceeding and has its principal pl or has no principal place of business or assets in the United States I in this District, or the interests of the parties will be served in reg	out is a defendant in an action or pro	oceeding [in a federal or stat			
Certification by a Debtor Who Reside (Check all app  Landlord has a judgment against the debtor for possession of deb	licable boxes.)				
(Name of landlord or lesso	or that obtained judgment)				
(Address of lan	dlord or lessor)				
☐ Debtor claims that under applicable nonbankruptcy law, there are the entire monetary default that gave rise to the judgment for possible.			cure		
Debtor has included in this petition the deposit with the court of filing of the petition.	any rent that would become due du	ring the 30-day period afte	r the		
☐ Debtor certifies that he/she has served the Landlord with this cert	ification. (11 U.S.C. § 362(1)).				

### **Voluntary Petition**

(This page must be completed and filed in every case)

Name of Debtor(s):

OTERO CASTRO, JOSE L

### **Signatures**

### Signature(s) of Debtor(s) (Individual/Joint)

I declare under penalty of perjury that the information provided in this petition is true and correct.

[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under Chapter 7] I am aware that I may proceed under chapter 7, 11, 12 or 13 of title 11, United State Code, understand the relief available under each such chapter, and choose to proceed under chapter 7.

[If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. § 342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

### X /s/JOSE L OTERO CASTRO

Signature of Debtor

**JOSE L OTERO CASTRO** 

X,

Signature of Joint Debtor

(787) 448-4800

Telephone Number (If not represented by attorney)

August 18, 2011

Date

### Signature of Attorney\*

### X /s/RAFAEL MALDONADO-PEREZ

Signature of Attorney for Debtor(s)

### **RAFAEL MALDONADO-PEREZ 15717**

Printed Name of Attorney for Debtor(s)

### Rafael Maldonado-Perez

Firm Name

PO Box 194669

Address

San Juan, PR 00927

### (787) 786-7533

Telephone Number

### August 18, 2011

Date

### Signature of Debtor (Corporation/Partnership)

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

### Signature of a Foreign Representative

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only one box.)

I request relief in accordance with chapter 15 of title 11, United
States Code. Certified copies of the documents required by 11 U.S.C
§ 1515 are attached.

Pursuant to 11 U.S.C. § 1511, I request relief in accordance with the
chapter of title 11 specified in this petition. A certified copy of the
order granting recognition of the foreign main proceeding is attached.

Signature of	Foreign Represe	entative	
Printed Nam	e of Foreign Rep	oresentative	

### **Signature of Non-Attorney Petition Preparer**

I declare under penalty of perjury that: 1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; 2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h) and 342(b); 3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Date

Social Security Number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.)

Address		

Signature of Bankruptcy Petition Preparer or officer, principal, responsible person, or partner whose social security number is provided above.

Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both 11 U.S.C. § 110; 18 U.S.C. § 156.

<sup>\*</sup>In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

# © 1993-2008 EZ-Filing, Inc. [1-800-998-2424] - Forms Software Only

Signature of Debtor: /s/ JOSE L OTERO CASTRO

Date: August 18, 2011

### United States Bankruptcy Court District of Puerto Rico

District of	ruerto Rico
IN RE:	Case No
OTERO CASTRO, JOSE L	Chapter 13
	R'S STATEMENT OF COMPLIANCE ELING REQUIREMENT
do so, you are not eligible to file a bankruptcy case, and the cou whatever filing fee you paid, and your creditors will be able to	tatements regarding credit counseling listed below. If you cannot art can dismiss any case you do file. If that happens, you will lose resume collection activities against you. If your case is dismissed to pay a second filing fee and you may have to take extra steps
Every individual debtor must file this Exhibit D. If a joint petition is jone of the five statements below and attach any documents as direct	filed, each spouse must complete and file a separate Exhibit D. Check cted.
the United States trustee or bankruptcy administrator that outlined	se, I received a briefing from a credit counseling agency approved by the opportunities for available credit counseling and assisted me in the agency describing the services provided to me. Attach a copy of the agh the agency.
the United States trustee or bankruptcy administrator that outlined performing a related budget analysis, but I do not have a certificate	the, I received a briefing from a credit counseling agency approved by the opportunities for available credit counseling and assisted me in from the agency describing the services provided to me. You must file ded to you and a copy of any debt repayment plan developed through d.
days from the time I made my request, and the following exigen	opproved agency but was unable to obtain the services during the five at circumstances merit a temporary waiver of the credit counseling unied by a motion for determination by the court.][Summarize exigent
obtain the credit counseling briefing within the first 30 days after the agency that provided the briefing, together with a copy of extension of the 30-day deadline can be granted only for cause ar be filed within the 30-day period. Failure to fulfill these require	it will send you an order approving your request. You must still you file your bankruptcy case and promptly file a certificate from any debt management plan developed through the agency. Any dis limited to a maximum of 15 days. A motion for extension must rements may result in dismissal of your case. If the court is not out first receiving a credit counseling briefing, your case may be
motion for determination by the court.]  Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by of realizing and making rational decisions with respect to fine	y impaired to the extent of being unable, after reasonable effort, to
5. The United States trustee or bankruptcy administrator has deteddoes not apply in this district.	ermined that the credit counseling requirement of 11 U.S.C. § 109(h)
I certify under penalty of perjury that the information provided abo	ve is true and correct.

Certificate Number: 03605-PR-CC-015792086



### **CERTIFICATE OF COUNSELING**

I CERTIFY that on <u>August 18, 2011</u>, at <u>8:32</u> o'clock <u>AM AST</u>, <u>JOSE L OTERO CASTRO</u> received from <u>Consumer Credit Counseling Service of Puerto Rico</u>, <u>Inc.</u>, an agency approved pursuant to 11 U.S.C. § 111 to provide credit counseling in the <u>District of Puerto Rico</u>, an individual [or group] briefing that complied with the provisions of 11 U.S.C. §§ 109(h) and 111.

A debt repayment plan <u>was not prepared</u>. If a debt repayment plan was prepared, a copy of the debt repayment plan is attached to this certificate.

This counseling session was conducted in person.

Date: August 18, 2011

By: /s/Noelia Castro

Name: Noelia Castro

Title: QI Specialist

<sup>\*</sup> Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. See 11 U.S.C. §§ 109(h) and 521(b).

## **United States Bankruptcy Court District of Puerto Rico**

IN RE:	Case	No
OTERO CASTRO, JOSE L	Chap	ter <b>13</b>

Debtor(s)

### **SUMMARY OF SCHEDULES**

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors also must complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NUMBER OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	\$ 0.00		
B - Personal Property	Yes	3	\$ 7,704.00		
C - Property Claimed as Exempt	Yes	1			
D - Creditors Holding Secured Claims	Yes	1		\$ 0.00	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	3		\$ 12,949.54	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	3		\$ 171,990.12	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1			
I - Current Income of Individual Debtor(s)	Yes	1			\$ 5,958.00
J - Current Expenditures of Individual Debtor(s)	Yes	1			\$ 5,572.65
	TOTAL	16	\$ 7,704.00	\$ 184,939.66	

© 1993-2008 EZ-Filing, Inc. [1-800-998-2424] - Forms Software Only

# © 1993-2008 EZ-Filing, Inc. [1-800-998-2424] - Forms Software Only

# **United States Bankruptcy Court District of Puerto Rico**

IN RE:	Case No
OTERO CASTRO, JOSE L	Chapter 13
Debtor(s)	
STATISTICAL SUMMARY OF CERTAIN LIABI	LITIES AND RELATED DATA (28 U.S.C. § 159)
If you are an individual debtor whose debts are primarily consumer 101(8)), filing a case under chapter 7, 11 or 13, you must report all i	
Check this box if you are an individual debtor whose debts are information here.	NOT primarily consumer debts. You are not required to report any
This information is for statistical purposes only under 28 U.S.C.	§ 159.
Summarize the following types of liabilities, as reported in the So	chedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	\$ 7,369.14
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	\$ 5,580.40
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	\$ 0.00
Student Loan Obligations (from Schedule F)	\$ 0.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	\$ 0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	\$ 0.00
TOTAL	\$ 12,949.54

### **State the following:**

Average Income (from Schedule I, Line 16)	\$ 5,958.00
Average Expenses (from Schedule J, Line 18)	\$ 5,572.65
Current Monthly Income (from Form 22A Line 12; <b>OR</b> , Form 22B Line 11; <b>OR</b> , Form 22C	
Line 20)	\$ 4,872.16

### **State the following:**

1. Total from Schedule D, "UNSECURED PORTION, IF ANY" column		\$ 0.00
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column.	\$ 12,949.54	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		\$ 0.00
4. Total from Schedule F		\$ 171,990.12
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		\$ 171,990.12

R6A	(Official	Form	6A)	(12/07)

IN	$\mathbf{p}\mathbf{F}$	OTERO	CASTRO.	JOSE
	N P	OIENO	CASINO.	JUSE

Case No	
	(If known)

### **SCHEDULE A - REAL PROPERTY**

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether the husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim."

If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

DESCRIPTION AND LOCATION OF PROPERTY	NATURE OF DEBTOR'S INTEREST IN PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION	AMOUNT OF SECURED CLAIM
None				

TOTAL

0.00

(Report also on Summary of Schedules)

IN RE	OTERO	CASTRO.	JOSE I
-------	-------	---------	--------

Case No.	
	(If known)

### **SCHEDULE B - PERSONAL PROPERTY**

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether the husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
1. Cash on hand.	Х			
<ol> <li>Checking, savings or other financial accounts, certificates of deposit or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.</li> </ol>	X			
Security deposits with public utilities, telephone companies, landlords, and others.	X			
Household goods and furnishings, include audio, video, and computer equipment.		Computer equipment located at home.	Н	700.00
5. Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.	X			
6. Wearing apparel.		Apparel & Clothing located at Home	Н	400.00
7. Furs and jewelry.	X			
Firearms and sports, photographic, and other hobby equipment.	X			
Interest in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	X			
Annuities. Itemize and name each issue.	X			
11. Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	X			
12. Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.	X			
Stock and interests in incorporated and unincorporated businesses.     Itemize.		Excellentia Inc. incorporated in Puerto Rico Excellentia LLC incorporated in Florida	H	0.00 154.00
14. Interests in partnerships or joint ventures. Itemize.	X			

$\sim$		-
Case	N	$\sim$
Case	1.1	v.

(If known)

# SCHEDULE B - PERSONAL PROPERTY (Continuation Sheet)

	TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
15.	Government and corporate bonds and other negotiable and non-negotiable instruments.	X			
16.	Accounts receivable.	X			
17.	Alimony, maintenance, support, and property settlements in which the debtor is or may be entitled. Give particulars.	X			
18.	Other liquidated debts owed to debtor including tax refunds. Give particulars.	X			
19.	Equitable or future interest, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	X			
20.	Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	X			
21.	Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	Х			
22.	Patents, copyrights, and other intellectual property. Give particulars.	Х			
23.	Licenses, franchises, and other general intangibles. Give particulars.	Х			
24.	Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X			
25.	Automobiles, trucks, trailers, and		Honda Pilot LX 2004 located at Home.	Н	5,950.00
	other vehicles and accessories.		Volkswagen Vanagon 1989 at Home.	Н	500.00
26.	Boats, motors, and accessories.	X			
27.	Aircraft and accessories.	X			
28.	Office equipment, furnishings, and supplies.	Х			
29.	Machinery, fixtures, equipment, and supplies used in business.	Х			
30.	Inventory.	Х			
31.	Animals.	X			

$\sim$	3 T
Case	NΩ

(If known)

## SCHEDULE B - PERSONAL PROPERTY (Continuation Sheet)

			TO	ΓAL	7,704.00
			TO	ΓAL	7,704.00
33. 34.	Crops - growing or harvested. Give particulars. Farming equipment and implements. Farm supplies, chemicals, and feed. Other personal property of any kind not already listed. Itemize.	X X X		HUSBA	EXEMPTION
	TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION

© 1993-2008 EZ-Filing, Inc. [1-800-998-2424] - Forms Software Only

0	NT.	
Case	INO	

(If known)

### SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Debtor	elects	the	exemptions	to	which	debtor	is	entitled	under:
(Check or	ne box)		_						

☐ Check if debtor claims a homestead exemption that exceeds \$136,875.

v	11	U.S.C.	§	522(b)(2)
	111	U.S.C.	8	522(b)(3)

DESCRIPTION OF PROPERTY	SPECIFY LAW PROVIDING EACH EXEMPTION	VALUE OF CLAIMED EXEMPTION	CURRENT VALUE OF PROPERTY WITHOUT DEDUCTING EXEMPTIONS
CHEDULE B - PERSONAL PROPERTY			
computer equipment located at home.	11 USC § 522(d)(3)	700.00	700.0
pparel & Clothing located at Home	11 USC § 522(d)(3)	400.00	400.0
xcellentia LLC incorporated in Florida	11 USC § 522(d)(5)	154.00	154.0
onda Pilot LX 2004 located at Home.	11 USC § 522(d)(2) 11 USC § 522(d)(5)	3,225.00 2,725.00	5,950.0
olkswagen Vanagon 1989 at Home.	11 USC § 522(d)(5)	500.00	500.0

Case No.
 (IC 1)

Data.)

Debtor(s)

### SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is the creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H – Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim Without Deducting Value of Collateral" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion, if Any" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
ACCOUNT NO.								
			Value \$	1	Ì			
ACCOUNT NO.								
					l			
			Value \$	1	Ì			
ACCOUNT NO.				T				
			Value \$	1	Ì			
ACCOUNT NO.				Τ	T			
					ļ			
			Value \$	1				
_		-		Sut				
ocntinuation sheets attached			(Total of th				\$	\$
			(Use only on la		Tot		\$	\$
			(ese only on a	I		-,	(Report also on	(If applicable, report
							Summary of Schedules.)	also on Statistical Summary of Certain

R6F	(Official	Form	(F)	(12/07)
KOH.	(CHICIAL	RAPM	DH.I	

### IN RE OTERO CASTRO, JOSE L

	_ Case No	
Debtor(s)		(If known)

### SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts <u>not</u> entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total the Statistical Summary of Certain Liabilities and Related Data.	
Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.	
TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)	
Domestic Support Obligations  Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guarding responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided U.S.C. § 507(a)(1).	
Extensions of credit in an involuntary case Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).	of the
Wages, salaries, and commissions Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qual independent sales representatives up to \$10,950* per person earned within 180 days immediately preceding the filing of the original petition, cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).	
Contributions to employee benefit plans  Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).	or the
Certain farmers and fishermen Claims of certain farmers and fishermen, up to \$5,400* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).	
Deposits by individuals Claims of individuals up to \$2,425* for deposits for the purchase, lease, or rental of property or services for personal, family, or household us were not delivered or provided. 11 U.S.C. § 507(a)(7).	se, that
Taxes and Certain Other Debts Owed to Governmental Units Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).	
Considerate A. Maintain the Control of an Immed Dan Standard and	

### ☐ Commitments to Maintain the Capital of an Insured Depository Institution

Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9).

### Claims for Death or Personal Injury While Debtor Was Intoxicated

Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

\* Amounts are subject to adjustment on April 1, 2010, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

2 continuation sheets attached

	T T	
Case	NO	

(If known)

# SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS (Continuation Sheet)

### **Domestic Support Obligations**

(Type of Priority for Claims Listed on This Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE AND ACCOUNT NUMBER. (See Instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED		AMOUNT OF CLAIM	AMOUNT ENTITLED TO PRIORITY	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY
ACCOUNT NO. <b>0359240</b>		Н	Incurred during last 9 months	t	t					
Department Of The Family Administration For Child Support PO Box 70376 San Juan, PR 00936-8376			Ç					7,369.14	7,369.14	
ACCOUNT NO.			Assignee or other notification							
Ana T. Rios Pulpeiro Sagrado Corazon Calle Santa Angel 1623 San Juan, PR 00926			for: Department Of The Family							
ACCOUNT NO.										
ACCOUNT NO.										
ACCOUNT NO.										
ACCOUNT NO.										
Sheet no <b>1</b> of <b>2</b> continuation sheets	atta	ached	to		otot		T			
Schedule of Creditors Holding Unsecured Priority	Cla	aims	(Totals of th	is j	pag	e)	\$	7,369.14	\$ 7,369.14	\$
(Use only on last page of the comp	lete	ed Scł	nedule E. Report also on the Summary of Sch	ed		s.)	\$			
Total (Use only on last page of the completed Schedule E. If applicable, report also on the Statistical Summary of Certain Liabilities and Related Data.)									\$	\$

$\sim$	3 T	
Case	NIO	
Case	INO.	

(If known)

## SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS (Continuation Sheet)

### **Taxes and Other Certain Debts Owed to Governmental Units**

(Type of Priority for Claims Listed on This Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE AND ACCOUNT NUMBER. (See Instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT ENTITLED TO PRIORITY	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY
ACCOUNT NO. <b>581258517</b>		Н	Last 11 years.	Г					
Departamento De Hacienda PO Box 9024140 San Juan, PR 00902-4140							4,848.00	4,848.00	
ACCOUNT NO. <b>581258517</b>		Н	last 7 months.	H			4,040.00	4,040.00	
Department of Trasury Internal Revenue Sevice Center Austin, TX 73301							500.00	500.00	
ACCOUNT NO. <b>2000TR006497-0634AQ</b>		Н	Incurred in 2010.	t			000.00	000.00	
SC Services And Associates, Inc. PO Box 3116 Lake City, FL 32056							232.40	232.40	
ACCOUNT NO.									
ACCOUNT NO.	_								
ACCOUNT NO.									
Sheet no <b>2</b> of <b>2</b> continuation sheets Schedule of Creditors Holding Unsecured Priority	att Cla	ached aims	to (Totals of th			e)	\$ 5,580.40	\$ 5,580.40	\$
(Use only on last page of the comp	olete	ed Sch	nedule E. Report also on the Summary of Sch	edu	les	.)	\$ 12,949.54		
			last page of the completed Schedule E. If ap	plica		э,		s 12.949.54	\$

Case No.	
	(If known)

Summary of Certain Liabilities and Related Data.) \$

Debtor(s)

### SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured nonpriority claims to report on this Schedule F.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. <b>3772-499976-81000</b>		Н	Incurred during last 18 months		П		
American Express - Costco PO Box 1270 Newark, NJ 07101-1270							12,827.16
ACCOUNT NO. 108065928		Н	Incurred in last 2 months.		П		
Banco Pupular De Puerto Rico Po Box 362708 San Juan, PR 00936-2708							2,629.36
ACCOUNT NO.		Н	Incurred during last 60 months.				
Carlos V. Otero Oliveras Haciandas Borinquen Calle Palmas 719 Caguas, PR 00725							35,000.00
ACCOUNT NO. <b>5491-5401-8820-4432</b>		Н	Incurred during last 18 months				
Citi Platinum Select AAdvaantage Card PO Box 142319 Inving, TX 75014-2319							17,892.06
		<u> </u>	<u> </u>	L Sub	tota	ıl	<u> </u>
2 continuation sheets attached			(Total of th	-	_	` <b>+</b>	68,348.58
			(Use only on last page of the completed Schedule F. Report the Summary of Schedules and, if applicable, on the St	als		n	

$\sim$		-
Case	N	$\sim$
Case	1.1	v.

(If known)

# SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

		(	Continuation Sheet)				
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 8255909534369571		Н	Incurred during last 3 months.			П	
Dish Network PO Box 72006 San Juan, PR 00936-7602							94.51
ACCOUNT NO. <b>50022178</b>	X	С	Incurred 1/2/2002.	+		Н	
Doral Bank PO Box 1914 Guaynabo, PR 00970							72,300.00
ACCOUNT NO.		С	Incurred in last 6 months.				72,000.00
Leonardo Portela 26 Carretera 833 Apartamento 1220 Guaynabo, PR 00971							2,400.00
ACCOUNT NO.		С	Last 6 months	+		Н	
Monica Diaz College Park Calle Alcala 1752 San Juan, PR 00921							2,850.00
ACCOUNT NO. 6476		Н	Incurred during last 14 months.				,
Oriental Bank & Trust PO Box 195115 San Juan, PR 00919-5115							10 177 70
ACCOUNT NO.		н	Incurred in February 2011.	+		Н	19,177.79
Rafael Rosario Cabrera PMB 685, Ave. Winston Churchill 138 San Juan, PR 00926-6023							
L GGOVERNO FOLIO 14 10 10 10 10 10 10 10 10 10 10 10 10 10		Ц	Incurred during last 6 months	+		Н	2,000.00
ACCOUNT NO. 5049941434949290  Sears Card PO Box 183081  Columbus, OH 43218-3081		<b>"</b>	Incurred during last 6 months.				0.000.00
Sheet no. 1 of 2 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claim			(Total of t	Sub nis p		- 1	2,386.68 \$ 101,208.98
			(Use only on last page of the completed Schedule F. Repo the Summary of Schedules, and if applicable, on the S Summary of Certain Liabilities and Relat	t als tatis	stic	n al	\$

	T T	
Case	NO	

(If known)

### SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

		_ ('	Continuation Sneet)	_			
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 5049941070698607		Н	Incurred durin last 6 months.	Н		H	
Sears Charge Plus Po Box 183081 Columbus, OH 43218-3081							2,432.56
ACCOUNT NO.							
ACCOUNT NO.							
	•						
ACCOUNT NO.							
ACCOUNT NO.							
A COOLINE NO				Н		$\dashv$	
ACCOUNT NO.							
ACCOUNT NO.							
Sheet no. <b>2</b> of <b>2</b> continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			(Total of th	Sub			\$ <b>2,432.56</b>
Schedic of Creators froming Onsecured Nonphority Claims			(Use only on last page of the completed Schedule F. Report the Summary of Schedules, and if applicable, on the St Summary of Certain Liabilities and Relate	also atis	ota o o tica	al n	\$ 171,990.12

© 1993-2008 EZ-Filing, Inc. [1-800-998-2424] - Forms Software Only

IN RE	<b>OTERO</b>	CASTRO.	. JOSE I
-------	--------------	---------	----------

(If known)

### SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser," "Agent," etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

✓ Check this box if debtor has no executory contracts or unexpired leases.

	DESCRIPTION OF CONTRACT OR LEAST AND NATURE OF DERIVORS INVESTIGATION
NAME AND MAILING ADDRESS, INCLUDING ZIP CODE OF OTHER PARTIES TO LEASE OR CONTRACT	DESCRIPTION OF CONTRACT OR LEASE AND NATURE OF DEBTOR'S INTEREST. STATE WHETHER LEASE IS FOR NONRESIDENTIAL REAL PROPERTY. STATE CONTRACT NUMBER OF ANY GOVERNMENT CONTRACT.

IN RE OTERO CASTRO, JOS	ŝΕ	
-------------------------	----	--

_ Case No.	
	(If known)

### **SCHEDULE H - CODEBTORS**

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by the debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight-year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

NAME AND ADDRESS OF CODEBTOR	NAME AND ADDRESS OF CREDITOR
a T. Rios Pulpeiro grado Corazon le Santa Angel 1623 n Juan, PR 00926	Doral Bank PO Box 1914 Guaynabo, PR 00970

Case No.

(If known)

### SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by every married debtor, whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. Do not state the name of any minor child. The average monthly income calculated on this form may differ from the current monthly income calculated on From 22A, 22B, or 22C.

Debtor's Marital Status DEPENDENTS OF DEBTOR AND SPOUSE						
Married	RELATIONSHIP(S): Daughter-In-Law Son-In-Law Son Daughter	AGE(S): 20 19 3				
EMPLOYMENT:	DEBTOR			SPOUSE		
Occupation Name of Employer How long employed Address of Employer						
	or projected monthly income at time case filed) salary, and commissions (prorate if not paid mon	thly)	\$ 		\$ \$	POUSE
3. SUBTOTAL			\$	0.00	\$	
4. LESS PAYROLL DEDUCTIO a. Payroll taxes and Social Sec b. Insurance c. Union dues d. Other (specify)			\$ \$ \$ \$		\$ \$ \$ \$	
5. SUBTOTAL OF PAYROLL	DEDUCTIONS		\$	0.00	\$	
6. TOTAL NET MONTHLY T			\$		\$	
<ul><li>8. Income from real property</li><li>9. Interest and dividends</li></ul>	n of business or profession or farm (attach detailed		\$ \$ \$	5,958.00	\$ \$ \$	
(Specify)			\$		\$	
12. Pension or retirement income	2		\$		\$ \$	
13. Other monthly income (Specify)			\$ \$ \$		\$ \$ \$	
14. SUBTOTAL OF LINES 7	ΓHROUGH 13		\$	5,958.00	\$	
	NCOME (Add amounts shown on lines 6 and 14)		\$	5,958.00		
<b>16. COMBINED AVERAGE M</b> if there is only one debtor repeat	MONTHLY INCOME: (Combine column totals total reported on line 15)	from line 15;			5,958.00	

if there is only one debtor repeat total reported on line 15)

(Report also on Summary of Schedules and, if applicable, on Statistical Summary of Certain Liabilities and Related Data)

17. Describe any increase or decrease in income reasonably anticipated to occur within the year following the filing of this document: None

© 1993-2008 EZ-Filing, Inc. [1-800-998-2424] - Forms Software Only

ase No	
--------	--

(If known)

5,572.65

### SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)

Complete this sc	hedule by	estimating th	e average	or projected	d monthly ex	penses of	the debtor	and the debt	or's family at	time case	filed. Pro	rate any pay	ments	made b	oiweekly,
quarterly, semi-a	annually, o	r annually to	show m	onthly rate.	The average	monthly	expenses	calculated of	n this form n	nay differ	from the	deductions	from i	ncome	allowed
on Form22A or	22C.														
											~ 1				

Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Complete a separate schedule of expenditures labeled "Spouse."

1. Rent or home mortgage payment (include lot rented for mobile home)	\$	
a. Are real estate taxes included? Yes No ✓		
b. Is property insurance included? Yes No		
2. Utilities:		
a. Electricity and heating fuel	\$	190.00
b. Water and sewer	\$	45.00
c. Telephone	\$	24.00
d. Other	\$	
	\$	
3. Home maintenance (repairs and upkeep)	\$	200.00
4. Food	\$	400.00
5. Clothing	\$	200.00
6. Laundry and dry cleaning	\$	
7. Medical and dental expenses	\$	50.00
8. Transportation (not including car payments)	\$	400.00
9. Recreation, clubs and entertainment, newspapers, magazines, etc.	\$	
10. Charitable contributions	\$	
11. Insurance (not deducted from wages or included in home mortgage payments)		
a. Homeowner's or renter's	\$	
b. Life	\$	277.99
c. Health	\$	
d. Auto	<u> </u>	
e. Other	\$	
	<u>\$</u>	
12. Taxes (not deducted from wages or included in home mortgage payments)	— <sup>v</sup> —	
(Specify)	\$	
(4)	<u>\$</u>	
13. Installment payments: (in chapter 11, 12 and 13 cases, do not list payments to be included in the plan)	— <sup>v</sup> —	
a. Auto	\$	
b. Other	\$ —	
- Culti-	<u>\$</u>	
14. Alimony, maintenance, and support paid to others	<u>\$</u>	1,834.57
15. Payments for support of additional dependents not living at your home	\$ —	1,001101
16. Regular expenses from operation of business, profession, or farm (attach detailed statement)	\$	1,951.09
17. Other	\$ ——	1,001100
The Guide	\$	
	<u>\$</u>	
	—         —	
<b>18. AVERAGE MONTHLY EXPENSES</b> (Total lines 1-17. Report also on Summary of Schedules and, if		

19. Describe any increase or decrease in expenditures anticipated to occur within the year following the filing of this document: **None** 

### 20. STATEMENT OF MONTHLY NET INCOME

applicable, on the Statistical Summary of Certain Liabilities and Related Data.

a. Average monthly income from Line 15 of Schedule I	\$ 5,958.00
b. Average monthly expenses from Line 18 above	\$ 5,572.65
c. Monthly net income (a. minus b.)	\$ 385.35

1993-2008 EZ-Filing, Inc. [1-800-998-2424] - Forms Software Only

Case	NIa
Case	INO.

Debtor(s)

(If known)

### DECLARATION CONCERNING DEBTOR'S SCHEDULES

### DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of **18** sheets, and that they are true and correct to the best of my knowledge, information, and belief. Signature: /s/ JOSE L OTERO CASTRO Date: August 18, 2011 Debtor **JOSE L OTERO CASTRO** Signature: \_ (Joint Debtor, if any) [If joint case, both spouses must sign.] DECLARATION AND SIGNATURE OF NON-ATTORNEY BANKRUPTCY PETITION PREPARER (See 11 U.S.C. § 110) I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342 (b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required by that section. Printed or Typed Name and Title, if any, of Bankruptcy Petition Preparer Social Security No. (Required by 11 U.S.C. § 110.) If the bankruptcy petition preparer is not an individual, state the name, title (if any), address, and social security number of the officer, principal, responsible person, or partner who signs the document. Address Signature of Bankruptcy Petition Preparer Date Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document, unless the bankruptcy petition preparer is not an individual: If more than one person prepared this document, attach additional signed sheets conforming to the appropriate Official Form for each person. A bankruptcy petition preparer's failure to comply with the provision of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 110; 18 U.S.C. § 156. DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF CORPORATION OR PARTNERSHIP (the president or other officer or an authorized agent of the corporation or a member or an authorized agent of the partnership) of the (corporation or partnership) named as debtor in this case, declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of \_\_\_\_\_ sheets (total shown on summary page plus 1), and that they are true and correct to the best of my knowledge, information, and belief.

(Print or type name of individual signing on behalf of debtor)

[An individual signing on behalf of a partnership or corporation must indicate position or relationship to debtor.]

Signature:

### United States Bankruptcy Court District of Puerto Rico

23. **AVERAGE NET MONTHLY INCOME** (Subtract Item 22 from Item 2)

IN RE:	Case	No		
OTERO CASTRO, JOSE L	Chap	ter <b>13</b>		
Debtor(s)				
BUSINESS INCOME AND EXPENSE	ES			
FINANCIAL REVIEW OF THE DEBTOR'S BUSINESS (Note: ONLY INCLUDE operation.)	∐ informa	tion directly re	lated to th	e business
PART A - GROSS BUSINESS INCOME FOR THE PREVIOUS 12 MONTHS:				
1. Gross Income For 12 Months Prior to Filing:	\$	71,497.00		
PART B - ESTIMATED AVERAGE FUTURE GROSS MONTHLY INCOME:				
2. Gross Monthly Income:			\$	5,958.00
PART C - ESTIMATED FUTURE MONTHLY EXPENSES:				
<ol> <li>Net Employee Payroll (Other Than Debtor)</li> <li>Payroll Taxes</li> <li>Unemployment Taxes</li> <li>Worker's Compensation</li> <li>Other Taxes</li> <li>Inventory Purchases (Including raw materials)</li> <li>Purchase of Feed/Fertilizer/Seed/Spray</li> <li>Rent (Other than debtor's principal residence)</li> <li>Utilities</li> <li>Office Expenses and Supplies</li> <li>Repairs and Maintenance</li> <li>Vehicle Expenses</li> <li>Travel and Entertainment</li> <li>Equipment Rental and Leases</li> <li>Legal/Accounting/Other Professional Fees</li> <li>Insurance</li> <li>Employee Benefits (e.g., pension, medical, etc.)</li> <li>Payments to be Made Directly by Debtor to Secured Creditors for Pre-Petition Business Debts (Specify):</li> </ol>	\$ \$	25.00 216.92 156.83 99.42 91.92 154.50 247.50 53.75 354.25		
21. Other (Specify):	\$			
22. Total Monthly Expenses (Add items 3-21)			\$	1,951.09
PART D - ESTIMATED AVERAGE <u>NET</u> MONTHLY INCOME				

\$ \_\_\_\_\_\_

# © 1993-2008 EZ-Filing, Inc. [1-800-998-2424] - Forms Software Only

### United States Bankruptcy Court District of Puerto Rico

IN RE:	Case No
OTERO CASTRO, JOSE L	Chapter 13
Debtor(s)	<u> </u>

STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

### **DEFINITIONS**

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any owner of 5 percent or more of the voting or equity securities of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; any managing agent of the debtor. 11 U.S.C. § 101.

### 1. Income from employment or operation of business

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE

71,497.00 Debtor has receives income in the form of professional services from two corporations, Excellentia LLC in the amount of \$61,166.35, and from Excellentia Inc. in the amount of \$10,331.21

### 2. Income other than from employment or operation of business

None

State the amount of income received by the debtor other than from employment, trade, profession, operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

### 3. Payments to creditors

Complete a. or b., as appropriate, and c.

None a Individual or joint debtor(s) v

a. Individual or joint debtor(s) with primarily consumer debts: List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within **90 days** immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

None	Debitor whose debts are not primarily consumer debts. East each payment of other transfer to any creditor made within 70 days infinediately								
None		nder chapter 12 or chapter 13 m	e commencement of this case to or for the benefit of creditors ust include payments by either or both spouses whether or not filed.)						
4. Su	its and administrative proceedings, executions, ga	arnishments and attachments							
None		pter 12 or chapter 13 must inclu	arty within <b>one year</b> immediately preceding the filing of this ade information concerning either or both spouses whether or not filed.)						
None		filing under chapter 12 or chapt	or equitable process within <b>one year</b> immediately preceding ter 13 must include information concerning property of either rated and a joint petition is not filed.)						
BENI Rafa PMB	E AND ADDRESS OF PERSON FOR WHOSE EFIT PROPERTY WAS SEIZED el Rosario Cabrera 685, Ave. Winston Churchill 138 Juan, PR 00926-6023	DATE OF SEIZURE 11/15/2009	DESCRIPTION AND VALUE OF PROPERTY \$9,955.56 were seizad from IRA accounts to pay legal services by Order of the court.						
5. Re	possessions, foreclosures and returns								
None	the seller, within one year immediately preceding	the commencement of this case	transferred through a deed in lieu of foreclosure or returned to . (Married debtors filing under chapter 12 or chapter 13 must a joint petition is filed, unless the spouses are separated and a						
6. As	signments and receiverships								
None		13 must include any assignment	days immediately preceding the commencement of this case. by either or both spouses whether or not a joint petition is filed,						
None		under chapter 12 or chapter 13	appointed official within <b>one year</b> immediately preceding the must include information concerning property of either or both d a joint petition is not filed.)						
7. Gi	fts								
None	gifts to family members aggregating less than \$200	in value per individual family m 12 or chapter 13 must include	ing the commencement of this case except ordinary and usual ember and charitable contributions aggregating less than \$100 gifts or contributions by either or both spouses whether or not filed.)						
8. Lo	sses								
None		ng under chapter 12 or chapter 1	iately preceding the commencement of this case <b>or since the</b> 3 must include losses by either or both spouses whether or not filed.)						
9. Pa	yments related to debt counseling or bankruptcy								
None			persons, including attorneys, for consultation concerning debt by within <b>one year</b> immediately preceding the commencement						

NAME AND ADDRESS OF PAYEE **Consumer Credit Counseling Service Of PR** PO Box 8908 San Juan, PR 00910-0908

© 1993-2008 EZ-Filing, Inc. [1-800-998-2424] - Forms Software Only

DATE OF PAYMENT, NAME OF PAYOR IF OTHER THAN DEBTOR 8/18/2011

AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY

50.00

absolutely or as security within <b>two y</b>	roperty transferred in the ordinary course of the business or trears immediately preceding the commencement of this case either or both spouses whether or not a joint petition is filed	se. (Married debtors filing under chapter 12 or
None b. List all property transferred by the de device of which the debtor is a benefit	ebtor within <b>ten years</b> immediately preceding the commence ciary.	ment of this case to a self-settled trust or similar
11. Closed financial accounts		
transferred within <b>one year</b> immedia certificates of deposit, or other instru- brokerage houses and other financial	ments held in the name of the debtor or for the benefit of the tely preceding the commencement of this case. Include comments; shares and share accounts held in banks, credit unic institutions. (Married debtors filing under chapter 12 or chapter or both spouses whether or not a joint petition is filed.)	hecking, savings, or other financial accounts, ons, pension funds, cooperatives, associations, apter 13 must include information concerning
NAME AND ADDRESS OF INSTITUTION Banco Popular De Puerto Rico PO Box 362708 San Juan, PR 00936-2708	TYPE AND NUMBER OF ACCOUNT AND AMOUNT OF FINAL BALANCE Cheking #152-114254	AMOUNT AND DATE OF SALE OR CLOSING \$0.00 on 8/17/2011
Banco Popular De Puerto Rico PO Box 362708 San Juan, PR 00936-2708	Cheking #026-344750	\$105.83 on 8/18/2011
12. Safe deposit boxes		
preceding the commencement of this	depository in which the debtor has or had securities, cash, case. (Married debtors filing under chapter 12 or chapter 13 etition is filed, unless the spouses are separated and a joint p	must include boxes or depositories of either or
13. Setoffs		
case. (Married debtors filing under ch	ncluding a bank, against a debt or deposit of the debtor within apter 12 or chapter 13 must include information concerning a separated and a joint petition is not filed.)	
14. Property held for another person		
None List all property owned by another pe $\checkmark$	rson that the debtor holds or controls.	
15. Prior address of debtor		
	s immediately preceding the commencement of this case, list ommencement of this case. If a joint petition is filed, report	
16. Spouses and Former Spouses		
Nevada, New Mexico, Puerto Rico, Te identify the name of the debtor's spou	munity property state, commonwealth, or territory (including exas, Washington, or Wisconsin) within <b>eight years</b> immediate and of any former spouse who resides or resided with the	ately preceding the commencement of the case,
NAME		

10. Other transfers

Ana T. Rio Pulpeiro

### 17. Environmental Information

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law.

 $\checkmark$ 

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law.

None b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

 $\checkmark$ 

c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

### 18. Nature, location and name of business

None a. If the debtor is an individual, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within six years immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within six years immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

 $\checkmark$ 

[If completed by an individual or individual and spouse]

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date: August 18, 2011	Signature /s/ JOSE L OTERO CASTRO	
	of Debtor	JOSE L OTERO CASTRO
Date:	Signature of Joint Debtor (if any)	
	<b>0</b> continuation pages attached	

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. § 152 and 3571.

# © 1993-2008 EZ-Filing, Inc. [1-800-998-2424] - Forms Software Only

### United States Bankruptcy Court District of Puerto Rico

IN RE:		Case No.
OTERO CASTRO, JOSE L		Chapter 13
	Debtor(s)	•
	VERIFICATION OF CREDITOR	MATRIX
The above named debtor(s) hereby	verify(ies) that the attached matrix listing	creditors is true to the best of my(our) knowledge.
Date: August 18, 2011	Signature: /s/ JOSE L OTERO CASTRO	0
	JOSE L OTERO CASTRO	Debtor
Date:	Signature:	
	-	Joint Debtor, if any

OTERO CASTRO, JOSE L EL MIRADOR CALLE 7, I-6 SAN JUAN, PR 00926 Dish Network PO Box 72006 San Juan, PR 00936-7602

Rafael Maldonado-Perez PO Box 194669 San Juan, PR 00927 Doral Bank PO Box 1914 Guaynabo, PR 00970

American Express - Costco PO Box 1270 Newark, NJ 07101-1270 Leonardo Portela 26 Carretera 833 Apartamento 1220 Guaynabo, PR 00971

Ana T. Rios Pulpeiro Sagrado Corazon Calle Santa Angel 1623 San Juan, PR 00926 Monica Diaz College Park Calle Alcala 1752 San Juan, PR 00921

Banco Pupular De Puerto Rico Po Box 362708 San Juan, PR 00936-2708 Oriental Bank & Trust PO Box 195115 San Juan, PR 00919-5115

Carlos V. Otero Oliveras Haciandas Borinquen Calle Palmas 719 Caguas, PR 00725 Rafael Rosario Cabrera PMB 685, Ave. Winston Churchill 138 San Juan, PR 00926-6023

Citi Platinum Select AAdvaantage Card PO Box 142319 Inving, TX 75014-2319 SC Services And Associates, Inc. PO Box 3116 Lake City, FL 32056

Departamento De Hacienda PO Box 9024140 San Juan, PR 00902-4140 Sears Card PO Box 183081 Columbus, OH 43218-3081

Department Of The Family Administration For Child Support PO Box 70376 San Juan, PR 00936-8376

Sears Charge Plus Po Box 183081 Colunbus, OH 43218-3081

Department of Trasury Internal Revenue Sevice Center Austin, TX 73301

# © 1993-2008 EZ-Filing, Inc. [1-800-998-2424] - Forms Software Only

### United States Bankruptcy Court District of Puerto Rico

IN	<b>RE:</b> Case No	
ОТ	ERO CASTRO, JOSE L Chapter 13	
_	Debtor(s)	
	DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR	
1.	Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 2016(b), I certify that I am the attorney for the above-named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:	
	For legal services, I have agreed to accept	
	Prior to the filing of this statement I have received\$	
	Balance Due	
2.	The source of the compensation paid to me was:  Debtor  Other (specify):	
3.	The source of compensation to be paid to me is: Debtor Debtor Other (specify):	
4.	I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.	
	I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.	
5.	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:	
6.	<ul> <li>a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;</li> <li>b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;</li> <li>c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;</li> <li>d. Representation of the debtor in adversary proceedings and other contested bankruptey matters;</li> <li>e. [Other provisions as needed]</li> </ul> By agreement with the debtor(s), the above disclosed fee does not include the following services:	
	CERTIFICATION	
I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.		
	August 18, 2011 /s/ RAFAEL MALDONADO-PEREZ	
-	Date Signature of Attorney	
	Rafael Maldonado-Perez	

Name of Law Firm